

480000 21769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

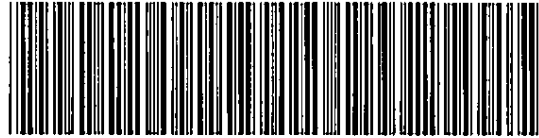
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 FEB 15 PM 3:12

Amend  
Name chg

FEB 21 2019

ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIVPAL GLOBAL LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Spyros Vlamis

\_\_\_\_\_  
Name of Person

AR Accounting & Tax Services

\_\_\_\_\_  
Firm/Company

5497 Wiles Road Suite 202

\_\_\_\_\_  
Address

Coconut Creek FL 33073

\_\_\_\_\_  
City/State and Zip Code

spyros@taxesar.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Spyros Vlamis

954

757-7100

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## RIVPAL GLOBAL LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Jose Rivas Perez	19518 N Coquina Way	<input type="checkbox"/> Add
		Weston FL 33332	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Arturo Jose Barroeta Prieto	16471 Blatt Blvd Apt 106	<input checked="" type="checkbox"/> Add
		Weston FL 33326	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 8<sup>th</sup>, 2019.

Isidoro Rivas

Typed or printed name of signee